PTO/SB/01 (03-01)
Approved for use through 10/31/2002 OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

U.S. Patent and Trademark Utrice; U.S. DEPARTMENT OF COMMISSION Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

Attorney Docket Number L - 1610**DECLARATION FOR UTILITY OR** Michael D. Vander Vorste First Named Inventor **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Unknown/ Application Number Unknown Filing Date Declaration Declaration Submitted OR Submitted after Initial Group Art Unit Unknown Filing (surcharge (37 CFR 1.16 (e)) with Initial

	required)			······································
As a below named inventor, I	hereby declare that:			
My residence, mailing address,	and citizenship are as stat	ed below next to my nam	ne.	
believe I am the original, first a names are listed below) of the s				
NEMA-TYPE AC	POWER OUTLET	CONNECTORS		
	(Title of t	he Invention)		
is attached hereto OR was filed on (MM/DD/YYY	Y)	as United St	tates Application	Number or PCT International
Application Number	and was a	amended on (MWDD/YY	YY)	(if applicable).
hereby state that I have review amended by any amendment sp	ed and understand the co pecifically referred to above	ntents of the above idente.	tified specification	n, including the daims, as
acknowledge the duty to disclo n-part applications, material info PCT international filing date of the	ormation which became as	railable between the filing	defined in 37 CF g date of the prior	R 1.56, including for continuation- application and the national or
or plant breeder's rights certific than the United States of Ame	ate(s), or 365(a) of any f rica, listed below and ha der's rights certificate(s), o	PCT international application and international applications application application application and application a	ation which desig by checking the	pplication(s) for patent, inventor's nated at least one country other box, any foreign application for ng a filing date before that of the
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES NO
None				
None		,		

()

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED. FORMS TO THIS ADDRESS. SEND TO. Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (03-01)
Approved for use through 10/3 t/2002, OMB 0831-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless? contains a valid OMB control number

DECLARATION — Utility or Design Patent Application

Direct all correspo	ndence to: Customer if or Bar Cod				OR X	Correspondence ad	idress below
Name Howard R. Lambert							
Address	5245 Gatewood I	ane					
City	Anaheim			State	CA	ZIP 928	07
Country	U.S.A.	Telep	(714) phone	637-	-5678	(714) Fax	637-5678
are believed to be made are punisha	hat all statements made herein of a true; and further that these statible by line or imprisonment, or lication or any patent issued there	tements ooth, un	, were made v <i>i</i> it	h the k	nowledge that will	iful faise statements	and the like so 1
NAME OF SO	LE OR FIRST INVENTOR	: 🗀	A petition h	as be	en filed for this	s unsigned invent	or
Given Name (first and middle [if any]) Michael Dwight Family Name Vander Vorste or Surname							
Inventor's Man Dute 10-5-01							
Residence: City	/ Sioux Falls		State SD		Country	Citizenship	USA
Yailing Address	312 N. Meyer L	ane					
ony Siot	ıx Falls		State SI)	ZIP 5710	3 Country	USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor							
Given Name	(ifanyi) Peter S.				ly Name irname	Pulizzi	
Inventor's Signature	3/x/. (3)	Liji.				10. Date #0	17-012
Residence: City	Fountain Valle	4	CA State		USA Country:	US Citizenship	SA
Paling Address 11080 Tilton Circle							
<u>O</u> Ø	Fountain Valle	<u> </u>	State CA		_{ZIP} 92708		USA
Additional inventors are being named on thesupplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.							

[Page 2 of 2]

DECLARATION — Utility or Design Patent Application

Direct all correspondence to Customer N or Bar Code	1	OR X C	orrespondence address below
Name Howard R. Lambert			
5245 Gatewood La	ane		
city Anaheim		State CA	ZIP 92807
U.S.A.	(714) Telephone	637-5678	(714) 637-5678 Fax
I hereby declare that all statements made herein of are believed to be true; and further that these stat- made are punishable by fine or imprisonment, or be validity of the application or any patent issued there	ements were made wi oth, under 18 U.S.C. 1	ith the knowledge that willful	false statements and the like so
NAME OF SOLE OR FIRST INVENTOR :	A petition	has been filed for this u	nsigned inventor
Given Name Michael Dwight Family Name Vander Vorste or Surname			
Inventor's Signature			Date
Residence: City Sioux Falls	State SD	Country	Citizenship USA
312 N. Meyer Lane Mailing Address			
c _{ity} Sioux Falls	State S	D ZIP 57103	Country USA
NAME OF SECOND INVENTOR: A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Peter S.		Family Name I	Pulizzi
Inventor's Signature	ligi		10-17-01 Date 10-3-01
Residence: City Fountain Valle	y CA	Country	USA Citizenship
Mailing Address 11080 Tilton C	ircle		
city Fountain Valle	y _{State} CA	ZIP 92708	Country USA
Additional inventors are being named on the	supplemental Add	itional Inventor(s) sheet(s) P	O/SB/02A attached hereto

_				
Please type a plus sign	(+) inside this box on Act of 1995, no persons are required to	Approved f U.S. Patent and Trademarks	or use through 10/31/2002, CMS.	/81 (02-21) 08-51-0025 OMMERCE
Inder the Paperwork Reduction	on Act of 1995, no sersons are required to		uriesa ir display a vaid oma con	rol number
		Application Number	Unknown	
		Filing Date	Michael D.Va	nder Vorste
POWER OF ATTORNEY OR		First Named Inventor Title		POWER OUTLE
	ATION OF AGENT	Group Art Unit	Unknown	CONNECTORS
		Examiner Name	Unknown	
		Anortey Oocket Number	L-1610	
I hereby appoint	:		Place Customer	
OR	rs at Customer Number (s) named below:		Number Sar Code Label hara	
CC Fractioner	Name	Par	istration Number	7
 	oward R. Lambert	1 2/.		-1 1
				7
				1 1
				7
business in the Ur	y(s) or agent(s) to prosecute the nited States Patent and Trader	mark Office connected then	rewith.	
, harry	correspondence address for	the above-identified application	ation to:	
OR	entioned Customer Number.		Place Customer	
	at Customer Number		Number Bar Code Label here	
Firm or Individual Nam	e Howard R. L	amber:		
Address	5245 Gatewo	5245 Gatewood Lane		
Address				
City	Anaheim	State C	A zip 928	30 /
Country	U.S.A.			
Telephone	(714) 637-5	678 Fax (714) 637-5678	
	inventor. of record of the entire interest. Lunder 37 CFR 3.73(b) is encl			
			d	
	Michael D. Vano	dicant or Assignee of Recor der Vorste	u .	
Name Michael B. Valida Volume				

Total of 2 forms are submitted.

Surcer Hour Storment This forms are submitted to take 3 minutes to complete. The will vary depending upon the needs of the incliniqual case. Any dominants on the amount of time you are required to complete this form should be sent to the Chief Information Officer. U.S. Parent and Trademark Officer, Washington, OC 20211, OO NOT SEND FRES OR COMPLETED FORMS TO THIS ADDRESS SEND TO Assistant Commissioner for Patents, Washington, OC 20211.

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple

forms of more than one signature is required, see below?.

PTO/S8/31 (02-01)

Approved for use through 10/31/2002 OMB 0631-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to rescond to a collection of information unless it display a valid OMB control number

POWER OF ATTORNEY OR **AUTHORIZATION OF AGENT**

	THE REPORT OF THE CONTROL FIGHT OF	
Application Number	Unknown	1
Filing Date	Unknown	
First Named Inventor	Michael D.Vander Vo	rste
Title	NEMA-TYPE AC POWER	OUTLET
Group Art Unit		CTORS
Examiner Name	Unknown	
Attorney Docket Number	L-1610)

I hereby appoint:					
Practitioners at COOR X Practitioner(s) na	Customer Number med below:	Place Customer Number Bar Code Label here			
	Name	Registration Number			
Howar	rd R. Lambert	27,206			
as my/our attorney(s) or business in the United S	as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.				
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Number Bar Code Label bern					
OR Firm or					
Individual Name	Howard R. Lambert				
Address					
Address					
City	Anaheim	State CA Zip 92807			
Country					
Telephone	(714) 637-5678 _F	ax (714) 637-5678			
I am the: X Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name Peter S. Pulizzi					
Signature St. A. S.					
Date 10-17-01					
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
Total of 2 forms are submitted.					

Burden Hour Statement. This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time, you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED. FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.